

TRAVEL VOUCHER(Read the Privacy Act
Statement on the back)

1. OFFICE OR COURT UNIT

2. TYPE OF TRAVEL

☐ TEMPORARY DUTY
☐ PERMANENT CHANGE
 OF STATION

3. VOUCHER NUMBER

4. TRAVELER (PAYEE)

a. NAME (Last, first, middle initial)

b. SOCIAL SECURITY NO.

5. PERIOD OF TRAVEL

a. FROM

b. TO

c. MAILING ADDRESS (Include ZIP Code)

d. OFFICE TELEPHONE NO.

6. TRAVEL AUTHORIZATION

a. NUMBER(S)

b. DATE(S)

e. PRESENT DUTY STATION

f. RESIDENCE (City and State)

7. TRAVEL ADVANCE

8. OPTIONAL USE

a. Total of all Outstanding Advances

b. Amount to be applied for this trip

c. Amount Repaid Government

Attached: ☐ Check ☐ Cash

d. Balance Outstanding

e. What are the numbers of the travel advances
being repaid at this time?

Travel Advance Numbers

This information will be provided by the finance office.

**9. TRANSPORTATION
TICKETS**List by number below and
attach passenger coupon.If paid by the traveler show
claim on the reverse side.

I hereby assign to the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7).

DATE
ISSUED
a.TOTAL
COST
b.AMOUNT
PAID BY
TRAVELER
c.AMOUNT
CHARGED TO GTA
(Centrally Billed
Account)
d.**POINTS OF TRAVEL**FROM
e.TO
f.

10. I certify that the purpose of this trip was official business and, further, that this claim for reimbursement of travel expenses is true and correct to the best of my knowledge and belief; further, I have not received any other payment or credit for the travel expenses claimed on this voucher.

TRAVELER
SIGN HERE ►

DATE

AMOUNT
CLAIMED ► \$

NOTE: Falsification of an item on an expense account causes a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

11. I have reviewed this travel voucher and the expenses claimed appear reasonable and in compliance with the judiciary supporting personnel travel policies.

VOUCHER
REVIEWER
SIGN HERE ►

DATE

13. FOR FINANCE OFFICE USE ONLY

a. DIFFERENCES
IF ANY (Explain
and show
amount)

12. I approve the business purpose of this trip(s) and reimbursement for the amount claimed appears reasonable.

APPROVING
OFFICIAL
SIGN HERE ►

DATE

b. TOTAL VERIFIED CORRECT FOR
CHARGE TO APPROPRIATION

\$

c. APPLIED TO TRAVEL ADVANCES

d. NET TO TRAVELER ►

\$

14. FY FUND BUD ORG COST ORG PROGRAM BOC SUB 02 SUB 03 SUB 04 SUB 05

ACCOUNTING
CLASSIFICATION:

